PLEASE PRINT

STATE OF NEW HAMPSHIRE

2018 Statement of Income and Expenses for LOBBYISTS

(RSA Chapter 15)

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	JOL 2 3 2010
1. Name of Lobbyist(s) Jenn Myers	NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's partnership, firm or corporation, if any:	DETAILMENT OF STATE
The Professional Fire Fighters of New Hampshire (Name of partnership, firm or corporation)	re
43 (cntre St. Concord NH 03301 Business Address: (Street) (Town/City) (State)	(Zip Code)
(ω)3 <u>λλδ-3304</u> (ω)3 <u>λλδ-3310</u> e-mail cnn@ ρ	
111. This statement covers: (Choose one - file separate reports for each client, OR you may fi reportable expense transactions which are not attributable to any one client).	le a separate report for
All reportable transactions occurring in the months prior to the reporting date relative to the fo	llowing client:
The Professional Fire Fighters of New Hampst (Full Name of Client as it appears on the Lobbyist Registration Form) OR	nire_
All reportable transactions by the lobbyist (including the lobbyist's family), or the lobbying firr unrelated to any particular client.	n listed below which are
IV. Date of Report April 25, 2018 Reports cover: activity from date of registration to 3/31/18 July 25, 2018 activity from 4/1/18 to 6/30/18	
October 31, 2018	
V. There have been no fees received and no reportable transactions made since the last this box is checked, complete just this form and submit it to the Secretary of State's Office, State Concord, NH 03301.	ast report. House, Room 204,
VI. Check if additional reports are attached:	
If you have received fees or made expenditures, you must file Addendum A- Fees and Expen If you have paid an honorarium or reimbursed expenses, you must file Addendum B- Report	
Expense Reimbursement	or monorariums or
☐ If you, your firm, or your family has made political contributions, you must file Addendum C	- Political Contributions
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B, RSA 14-C and RSA 664 and hereby swear or affirm that the foreg and complete to the best of my knowledge and belief.	oing information is true
(Signature of lobbyis) 7/24/20/ (Date)	8
(Print Name of lobbyis)	

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c) Total of all itemized expenditures reported in detail in section VI.

STATE OF NEW HAMPSHIRE

Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

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1. Name of Lobbyist(s)	Jenn	Mucrs

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1. Name of Lobbyist(s) Jenn Mycrs		NEW HAMPSHIRE DEPARTMENT OF ST
II. Name of lobbyist's partnership, firm or corporation, if any:		
The Professional Fire Fighers of New 1 (Name of partnership, firm or corporation)	tamps	shire
III. Name of Client	Date	
IV. Fees Received Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The gross reduced by any expenses:	relations, or	public relations services ant reported shall not be
a) Total of all fees received in this reporting periodb) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)	b) \$ 10	99.20
c) Total of all fees received to date (Add lines a and b)	c) \$ <u>3</u> A	1.27
d) Indicate the amount of any such fees that are due, but have not yet been paid	d) \$ <u>ζ</u>	*
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to reported. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report mexpenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office expendividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of less being lobbied, purchase of a ceremonial object given to a person being lobbied (c) an itemized statement of each individual expenditure made during this report any purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greater restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	lient and if of aggregate to penses; (b) as than \$10 to do with a valuating period e of greater than \$25, expense rei	expenditures are made by for the lobbyist(s)/firm. otal of all expenses paid the aggregate total of all echased during a business hat is given to the personue of \$25.00 or less); and of greater than \$25.00 for than \$25, purchase of a but not greater than \$50, imbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$)
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$ _ Z)

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	c) \$
f) Total of all expenses year to date	ns
VI. Other Expenses: Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	bbying fees during this reporting
Paid to: Sindenment Small in zurtupff zin	Amount:
	\$
	\$
	\$
	\$
	\$
UL TIE	
Sworn Statement/Affirmation by Lobbyist I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief. (Signature of lobbyist) (Print Name of lobby st)	

State of New Hampshire Signature Form for Associated Lobbyist RSA Chapter 15

Use this form to swear or affirm the truth and completeness of Income and Expense Statements and related Addendums.

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JUL 25 2018

NEW HAMPSHIRE DEPARTMENT OF STATE

Sworn Statement/Affirmation by Lobbyist Statement of Income and Expenses for:

Name of Lobbying partnership, firm, or corporation: The Hotasional Fire Fighters of NH
Name of Client (leave blank if Statement is for the partnership, firm, or corporation and not related to any
particular client):
Date of Report (check one):
April 25, 2018
I have read RSA 15, RSA 15-B, RSA 664, the Statement of Income and Expenses described above, and the following Addendums submitted with that Statement (insert the number of Addendum forms being submitted):
Addendum A(s).
Addendum B(s).
Addendum C(s).
I hereby swear or affirm that the foregoing information on the Statement and each Addendum is true and complete to the best of my knowledge and belief.
(Print Name of Johnson)